

POSITION DESCRIPTION (Please Read Instructions on the Back)

2. Reason for Submission <input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other Explanation (Show any positions replaced)		3. Service <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field		4. Employing Office Location		5. Duty Station		6. OPM Certification No.	
7. Fair Labor Standards Act <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Nonexempt		8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest		9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		10. Position Status <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)		11. Position Is <input checked="" type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input type="checkbox"/> Neither	
12. Sensitivity <input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive		13. Competitive Level Code		14. Agency Use *DOI026		15. Classified/Graded by Official Title of Position		Pay Plan Occupational Code Grade Initials Date	
a. Office of Personnel Management		b. Department, Agency or Establishment Fire Management Officer		c. Second Level Review Department of the Interior, FLERT Specialist		d. First Level Review This PD has been approved as follows under 5 USC 8336(c) and 8412(d) <input checked="" type="checkbox"/> Firefighter <input checked="" type="checkbox"/> Law Enforcement <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Secondary/Administrative		e. Recommended by Supervisor or Initiating Office Approval Date: October 26, 2004	
16. Organizational Title of Position (if different from official title)		17. Name of Employee (if vacant, specify)		18. Department, Agency, or Establishment Department of the Interior		a. First Subdivision BIA BLM FWS NPS		b. Second Subdivision	
19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.		20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which am responsible. This certification is made with the knowledge that		21. Classification/Job Grading Certification. I certify that the position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.		22. Position Classification Standards Used in Classifying/Grading Position Handbook Occupational Groups and Families, August 2001. Part I of the Forestry Series, GS-460, Jun 1965 TS-57, Dec 1979, TS-39.		Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.	

Signature _____ Date _____		Signature _____ Date _____	
23. Position Review a. Employee (optional) Initials _____ Date _____ b. Supervisor Initials _____ Date _____ c. Classifier Initials _____ Date _____		24. Remarks Allison Beard BIA Todd Ryan BLM Dawn Phillips FWS Debbie Burton Orton NPS	
25. Description of Major Duties and Responsibilities (See Attached)		26. Signature of Major Duties and Responsibilities (See Attached)	

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Previous Edition Usable

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U.S. Office of Personnel Management
FPM Chapter 295

*Agency Use Code should be entered in FPPS as last six digits of Position Allocation Number.